



PUBLIC NOTICE

UNITED STATES DISTRICT COURT DISTRICT OF SOUTH CAROLINA

Larry W. Propes, Clerk of Court

Effective December 2, 2002, the United States District Court for the District of South Carolina will permit payments for court-related fees and expenses to be made by credit card.

CREDIT CARD AUTHORIZATION FORM (ATTACHED): Law firms, partnerships, professional corporations, and sole proprietorships may present or mail a Credit Card Authorization Form to the court which will permit any individual designated on the form to request services and to charge to the credit card referenced on the form. This form must contain the original signature of the cardholder. The form will allow the designated individuals to charge to the account on file either via telephone or in person in any of our staffed offices located in Columbia, Charleston, Greenville, and Florence. The original forms will be stored in Columbia's vault. Copies of the forms will be stored in the vault in each of these other offices.

CREDIT CARD AUTHORIZATION FORM FOR CRIMINAL DEBT PAYMENTS (ATTACHED): Individuals wishing to charge criminal debt expenses (*e.g.*, special assessment, restitution, fine, etc.) via telephone must have the attached form on file with the court. A copy of the cardholder's driver's license or other identification along with a copy of both sides of the referenced credit card must be returned with and attached to the form. The original forms will be stored in Columbia's vault.

A copy of either form may be obtained from the court's web page, www.scd.uscourts.gov, or from the intake section of any of our staffed offices mentioned above.

Original forms should be mailed to: **United States District Court**
Attn: Larry Long
1845 Assembly Street
Columbia, SC 29201

INDIVIDUAL CARDHOLDERS: A form is not necessary when a payment is being made in one of our offices directly by a cardholder. However, a photo ID is required to be presented in order to accept the credit card payment.

ACCEPTED CARDS: Visa, Mastercard, Discover, American Express, and Diners Club.

Payments by credit card are not accepted for criminal bonds.

Further questions regarding credit card payments should be directed to Larry Long at 803.253.3473.



**UNITED STATES DISTRICT COURT
DISTRICT OF SOUTH CAROLINA**

CREDIT CARD AUTHORIZATION FORM

(Name of Company/Firm)

hereby authorizes the United States District Court for the District of South Carolina to charge the credit card listed below for payment of filing fees and other court related expenses incurred by the individuals listed below. I certify that I am authorized to sign the form on behalf of my firm.

Credit Cardholder Name: _____

Address: _____

Telephone Number: _____ Fax Number: _____

Signature: _____ Date: _____

Card Type (Visa, Mastercard, Discover, American Express, Diners Club): _____

Card Number: _____

Expiration Date: _____

INDIVIDUALS AUTHORIZED TO USE ABOVE CREDIT CARD ACCOUNT:

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Mail the original of this form to:

**United States District Court
Attn: Larry Long, Financial Administrator
1845 Assembly Street
Columbia, SC 29201**

This form will be stored in the court's vault and will remain in effect until the cardholder specifically revokes it in writing.

It is the responsibility of the cardholder and/or firm named above to submit a new form and notify the court when: 1) authorized users change; 2) a credit card has been renewed resulting in a new expiration date; and 3) a card has been revoked, canceled, or stolen.



UNITED STATES DISTRICT COURT DISTRICT OF SOUTH CAROLINA

CREDIT CARD AUTHORIZATION FORM FOR CRIMINAL DEBT PAYMENTS

I hereby authorize the United States District Court for the District of South Carolina to charge the credit card listed below for payment of criminal debt related expenses upon my request via telephone.

Credit Cardholder Name: _____

Address: _____

Telephone Number: _____ Fax Number: _____

Driver's License Number: _____ Driver's License State: _____

Signature: _____ Date: _____

Card Type (Visa, Mastercard, Discover, American Express, Diners Club): _____

Card Number: _____

Expiration Date: _____

Mail the original of this form to: **United States District Court**
Attn: Larry Long, Financial Administrator
1845 Assembly Street
Columbia, SC 29201

Note: A copy of the cardholder's driver's license or other identification along with a copy of both sides of the referenced credit card must be returned with this form.

This form will be stored in the court's vault and will remain in effect until the cardholder specifically revokes it in writing.

It is the responsibility of the cardholder named above to submit a new form and notify the court when: 1) the credit card has been renewed resulting in a new expiration date; and 2) a card has been revoked, canceled, or stolen.

To charge a criminal debt payment to your credit card, call our Columbia office at (803) 253-3137.